## DO/EO BIBLIOGRAPHIC DATA ENTRY

06 / RECEIPT DATE: 11 / 0.0 SERIAL NUMBER: 09 / 673658 99 IA FILING DATE: 04 / 27 / IA NUMBER: PCT/ EP99 / 02848 FAMILY NAME: DELAY WAIVED (Y/N): Υ **VEDDER** GIVEN NAME: KLAUS DEMAND RECEIVED (Y/N): Υ PRIORITY CLAIMED (Y/N): PRIORITY DATE: 05 / 98 Υ 07 /US DESIGNATED ONLY (Y/N): NO BASIC FEE (Y/N): N ATTORNEY DOCKET NUMBER: JEK/VEDDER COUNTRY: TELEPHONE CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 7036830500 FAX

NAME:

BACON & THOMAS

STREET: 625 SLATERS LANE FOURTH FLOOR

CITY: ALEXANDRIA

STATE/COUNTRY: VA ZIP: 223141176

EMAIL:

APPLICATION TITLES:

METHOD FOR AUTHENTICATING A CHIP CARD IN A MESSAGE TRANSMISSON NETWORK

TAB TO LAST POSITION, PUSH SEND